10/625, 980
Application or Docket Number
60/30-/09-07-07-05-74

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003									. • 			705
CLAIMS AS FILED - PAF					(Column 2)			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			19				ſ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			1G minus 20=		٠	10	П	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			3 minus 3 =		6			X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM PI	IESENT				ı	+140=		OR	+280=	
* If the difference in column 1 is less than				ero, ente	r "0" in c	column 2	L	TOTAL		OR	TOTAL	287)
CLAIMS AS AMENDED - PART II										10	OTHER	
1-12.05 (Column 1)				(Colu		(Column 3)		SMALL E	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 19	Minus	** 6	10.	= /		X\$ 9=	1	OR	X\$18=	9
	Independent	* 3	Minus	***	3	- /		X42=	/	OR	X84=	7
	FINOT PRESE	NIATION OF MI	ULTIPLE DE	PENUEN	CLAIM		֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֓֓֡	+140=		OR	+280=	7
							L	TOTAL		OR	TOTAL ADDIT. FEE	/
		(Column 1)		(Colu	mn 2)	(Column 3)		DDIT. FEE			AUDII. PEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		5		X\$ 9=		OR'	X\$18=	
	Independent	* NTATION OF MI	Minus	***	CL AIN	-		X42=		OR	X84=	
_	THOTTHEOL	THE PART OF THE		LINDEIN	CEXIII		, [+140=		OR	+280=	
		•					L	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)										-		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=	
	Independent		Minus	***		-	11	X42=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140=								OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										OR	TOTAL	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE											ADDIT. FEE	

FORM PTO-875 (Rev. 12/02)

*U.S. Government Printing Office: 2003 — 498-278/59151

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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